

Tool for assessing extent to which an organisation is a mentally healthy workplace

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Introduction

This tool has been adapted from a number of existing guides and standards to undertake an assessment of the extent to which an organisation has People and Culture, Workplace Health and Safety and Workplace Health Promotion capability to become a mentally healthy workplace. It is a high level desk top audit, an audit of commitment and capacity, rather than an audit of implementation. A mentally healthy workplace is defined as an organisation that has a commitment to and capability for the protection from psychosocial hazards and the promotion of mental wellbeing for its workers.

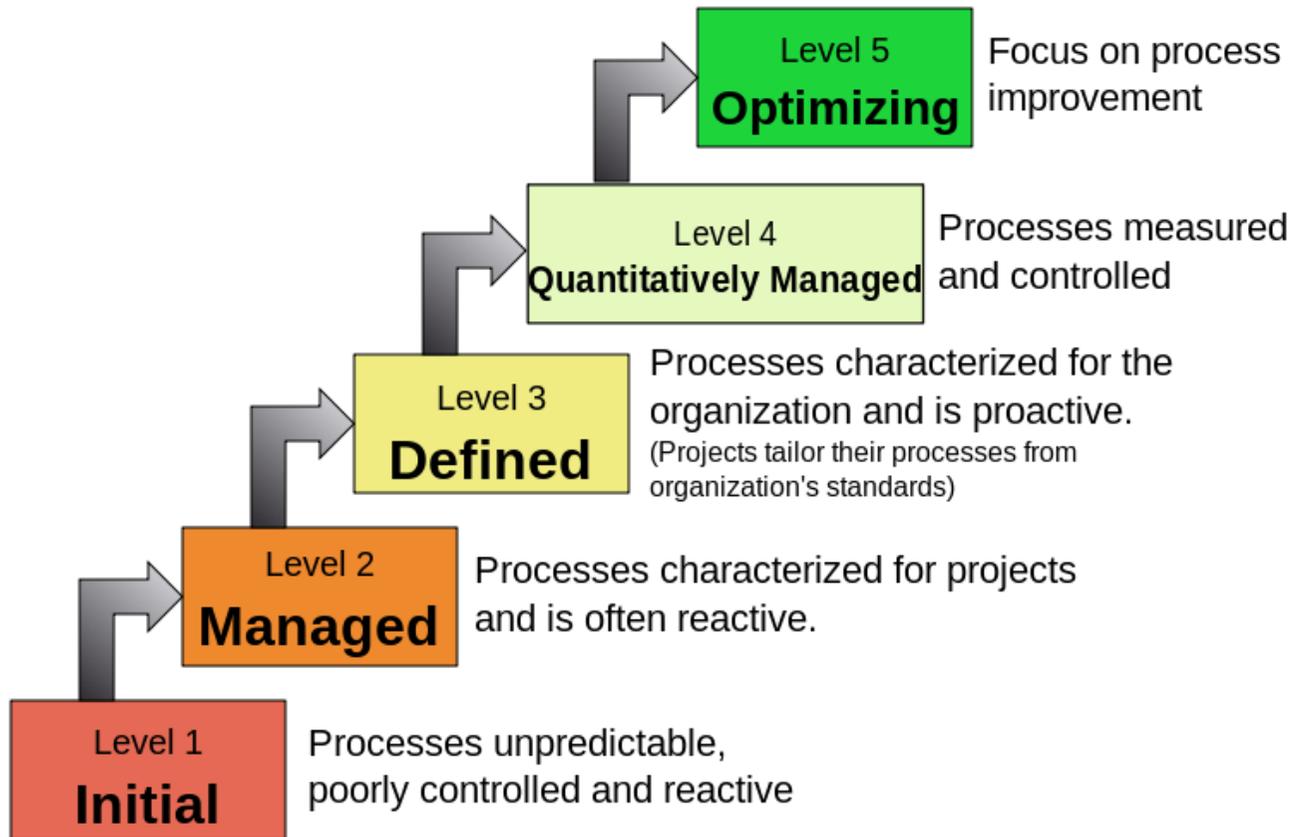
The following standards and guidelines have been used in the development of this benchmarking tool:

- Canadian Mental Health Commission National Standard (2013) – for the overall strategic framework
- Comcare, SWA, Fair Work guide As One Working Together Promoting Health and Wellbeing at Work – for the strategic pillars and the elements
- People@work for risk management in the working environment.

Underpinning the tool is the integrated approach to worker health, known as Total Worker Health in the US.

This tool has been developed at a time when there has been a significant rise in interest from employers in mental health. However most of the interventions being offered and implemented have focussed on supporting individuals with mental health problems. There is now a strong evidence base that working environments can contribute to both good health and poor health. Exploration of how best to build on existing WHS and People and Culture platforms to address the quality of working environments for health is a current issue. Consequently management systems for this are at a very early stage. Therefore the scale proposed is an adaption by KPMG of a commonly used scale for appraising management systems, for use in an immature management system. The appraisal scale is shown below.

Characteristics of the Maturity levels



Criterion	Rating guide	Comments	Examples
<p>1. A commitment to becoming a mentally healthy workplace is made in relevant corporate plans, for both mental health protection and mental health promotion</p>	<p>Level 1 – no specific mention of mental health</p> <p>Level 2 – commitment to supporting people with mental health problems, eg via EAP</p> <p>Level 3 – commitment to supporting people with mental health problems, and promoting mental health literacy, but protecting people from psychosocial hazards at work not addressed</p> <p>Level 4 – commitment to psychological well-being and protection against harm</p> <p>Level 5 – as above, but also continuous improvement</p>		<p>Canadian standard is ‘ A workplace that promotes workers’ psychological well-being and allows no harm to worker mental health in negligent, reckless or intentional ways’</p>
<p>2. Key business drivers for making the investment to becoming a mentally healthy workplace is made in corporate plans or business performance frameworks</p>	<p>Level 1 – no specific drivers/criteria for success articulated</p> <p>Level 2 – drivers/criteria for success relate to WHS compliance</p> <p>Level 3 – drivers for mental health articulated, cover WHS compliance, but do not relate well to broader business priorities</p> <p>Level 4 – drivers for mental health articulated, cover WHS compliance, and relate well to broader business priorities</p> <p>Level 5 – as above, but also</p>		<p>Canadian standard:</p> <ul style="list-style-type: none"> • Risk management • Cost effectiveness • Recruitment and retention • Organisational excellence and sustainability <p>Comcare:</p> <ul style="list-style-type: none"> • It’s the right thing to do (CSR) • It’s the law • It’s the smart thing to do

	continuous improvement		
3. Mentally healthy workplace strategy (as evidenced by an up to date plan) is integrated across People and Culture, WHS, WHP and operations and has a clear structure that embraces protection against harm, promotion of health (both primary prevention), early identification and support (secondary prevention), rehabilitation and return to work (tertiary prevention)	<p>Level 1 – no current plan, no systematic approach to mental health</p> <p>Level 2 – plan focusses on individual level interventions – early intervention and support and health literacy training</p> <p>Level 3 – plan is reasonably balanced across primary, secondary and tertiary prevention</p> <p>Level 4 – as above, but also shows evidence of an integrated approach</p> <p>Level 5 – as above, but also continuous improvement</p>		<p>Canadian standard:</p> <ul style="list-style-type: none"> • Prevention • Promotion • Resolution <p>Comcare guide:</p> <ul style="list-style-type: none"> • People management • Prevention • Early recognition and support • Rehabilitation and RTW
4. Management systems			
4.1 Leadership and management skills <ul style="list-style-type: none"> • Leadership development program provides managers with capability and support to fulfil their responsibilities to design work and people management strategies and systems, including for change, in a way that will contribute positively to a mentally healthy workplace 	<p>Level 1 – Leadership development program does not address mentally healthy workplaces</p> <p>Level 2 – addresses individual level interventions only, does not include design of work and management systems</p> <p>Level 3 – addresses individual and system level interventions</p> <p>Level 4 – focussed on system level interventions</p> <p>Level 5 – as above, but also continuous improvement (recognises</p>	<p>Need to develop 1.1 so it is tailored to mental wellbeing, but essentially would want to know that culture as is relevant to mental wellbeing is measured, and that action is being taken to improve, based on measurement</p> <p>Need to develop 1.2 a bit more – not just that mental wellbeing is taken into account, but drill down a bit on competencies, there is plenty of material on this</p>	HSE self assessment tool for competence of managers

<ul style="list-style-type: none"> • Middle management development program provides front line managers with capability and support to fulfil their responsibility to engage with their workers in a way that will contribute positively to a mentally healthy workplace, eg by involving staff in decisions, and in engaging with staff who appear to be struggling • Performance management holds senior and middle management accountable for these responsibilities 	<p>early days in this field, striving to be a leader)</p> <p>Level 1 – Middle management development program does not address mentally healthy workplaces</p> <p>Level 2 – addresses individual level interventions only, but only on reactive, ie once a mental health related problem has emerged</p> <p>Level 3 – addresses role of middle managers comprehensively (job design, supportive supervision, health literacy, identifying and assisting individuals, RTW)</p> <p>Level 4 – as above, plus reference to system level strategy and how and when to refer up</p> <p>Level 5 – as above, but also continuous improvement</p> <p>Level 1 – Performance management system does not address mentally healthy workplace strategy</p> <p>Level 2 – Addresses mentally healthy workplace strategy, but alignment of performance measures and role in strategy not good</p> <p>Level 3 – Addresses mentally healthy workplace strategy in a way appropriate for role in the strategy</p>	<p>1.3 and 1.4 are not specific to mental wellbeing, just need to know that these are best practice</p> <p>1.5 and 1.6 - Develop these more using the Comcare material and others. These may be addressed adequately with people@work, in which case take out of here</p>	
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<p>4.2 There is a current strategy for diversity and it encourages a culture which supports ability work and supports managers to make adjustments to accommodate illness, including mental illness</p> <p>4.3 There is a current strategy for creating a respectful workplace, including the prevention and management of bullying and harassment, and data related to these feeds into efforts to improve the quality of the working environment</p>	<p>Level 4 – as above, plus incentivises cross divisional collaboration</p> <p>Level 5 – as above, but also continuous improvement</p> <p>Level 1 – No strategy for diversity</p> <p>Level 2 – Strategy for diversity does not drive focus on ability to work for people with mental illness</p> <p>Level 3 – Strategy for diversity does drive a focus on ability to work for people with mental illness</p> <p>Level 4 – as above, plus Strategy for Diversity aligns to key drivers for a mentally healthy workplace</p> <p>Level 5 – as above, but also continuous improvement</p> <p>Level 1 – No strategy for creating a respectful workplace</p> <p>Level 2 – Strategy for respectful workplace does not comply with relevant guidelines for prevention and management of bullying and harassment</p> <p>Level 3 – Strategy for respectful workplace does comply with relevant guidelines for prevention and management of bullying and</p>		<p>Comcare, Preventing and</p>
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	<p>harassment</p> <p>Level 4 – as above, plus Strategy for respectful workplace aligns to key drivers for a mentally healthy workplace</p> <p>Level 5 – as above, but also continuous improvement</p>		<p>managing bullying at work. See: <www.comcare.gov.au>.</p> <p>Respect: Promoting a culture free from harassment and bullying in the APS. Commonwealth of Australia, 2011 (4th ed.)</p>
<p>5. Psychosocial work environment</p> <p>Has the identification, assessment, control and evaluation of psychosocial risks have been included in the WHS management system</p>	<p>Level 1 – No mature WHS risk management system</p> <p>Level 2 – WHS risk management system includes psychosocial risks, but not to the extent of an evidence-based approach. Or ad-hoc assessment of psychosocial risks, but not routine</p> <p>Level 3 – WHS risk management system includes evidence-based assessment of psychosocial risks</p>	<p>Sorting this out will need close work between WHS and People & Culture</p>	<p>HSE stress standards</p> <p>people@work</p> <p>others</p>

	<p>Level 4 – Treatment of psychosocial risks in WHS risk management system is commensurate with burden of consequence/benefit</p> <p>Level 5 – as above, but continuous improvement of psychosocial risk assessment and control</p>		
<p>6. Mental health promotion Provision of mental health education with the aim of de-stigmatisation, awareness of organisation’s policy to mental wellbeing and knowledge of support, resilience development</p>	<p>Level 1 – No mental health promotion</p> <p>Level 2 – Ad hoc mental health promotion events</p> <p>Level 3 – Ongoing strategic approach to mental health promotion, aligned to mentally healthy workplace strategy</p> <p>Level 4 – As above, plus meets evidence based practice for workplace health promotion</p> <p>Level 5 – As above, plus continuous improvement</p>		<p>For EBP refer to Do Workplace Health Promotion (Wellness) Programs Work? Johns Hopkins study, JOEM, September 2014. Works if:</p> <ul style="list-style-type: none"> • WHP goals aligned to business • WHP program design is evidence-based • WHP has theory-based implementation • Ongoing evaluation
<p>7. Early recognition and support Ensure there are procedures in the following, middle managers know of them, and are capable of implementing them</p> <p>7.1 When a worker has disclosed mental illness</p>	<p>Level 1 – No procedures for early recognition and support</p> <p>Level 2 – Some procedures, but not covering all areas, or non compliant with relevant guideline</p> <p>Level 3 – Best practice procedures for early recognition and support and</p>	<p>Adapt from Comcare guide, Section on Understanding my role as manager, Talking about mental health as well as the section on Early recognition and support</p> <p>Need to ensure focus on resolution</p>	<p>Comcare guide Understanding my role as a manager, Talking about mental health, Early recognition and support</p> <p>The Australian Human Rights Commission publication Workers</p>

<p>7.2 When co-workers and/or managers identify a problem</p> <p>7.3 When an incident occurs</p>	<p>their implementation</p> <p>Level 4 – As above, plus fully integrated into procedures and development for people management by middle management</p> <p>Level 5 – As above, plus continuous improvement</p>	<p>here</p>	<p>with Mental Illness: A Practical Guide for Managers covers privacy and disclosure and effective communications strategies. See: <www.humanrights.gov.au>.</p>
<p>5 Rehab RTW</p> <p>5.1 RTW best practice for mental illness</p> <p>5.2 Managing workers compensation claims, best practice for mental illness</p>	<p>Level 1 – Rehab RTW program has not met acceptable standards on audit</p> <p>Level 2 – Rehab RTW program meets acceptable standards on audit, but has not given specific consideration to mental illness problems (work and non-work)</p> <p>Level 3 – Rehab RTW program meets best practice standards on audit, and has addressed specific needs of mental illness for work-caused problems</p> <p>Level 4 – As above, but for work and non work related mental illness</p> <p>Level 5 – As above, plus continuous improvement</p>		<p>Comcare guide</p>
<p>6 Integration into organisational policies and process</p> <p>Evidence of collaborations across the organisation to streamline services and improve mental</p>	<p>Level 1 - Programs relevant to creation of a mentally healthy workplace are run by WHS, WHP and People and Culture with little or no co-ordination</p> <p>Level 2 – Contributions from WHS,</p>		

<p>wellbeing?</p>	<p>WHP and People and Culture are co-ordinated but not integrated</p> <p>Level 3 – People and Culture, WHS, WHP collaborate to develop, implement and evaluate Mentally Healthy Workplace Strategy,</p> <p>Level 4 – As above, with streamlining and sharing of resources</p> <p>Level 5 – As above, plus reflection and continuous improvement on how best to integrate</p>		
<p>7 Evaluation and CI</p> <p>Are there relevant KPIs and targets</p> <p>Are these reported upon</p> <p>Are improvements made</p>	<p>Level 1 - No assessment of performance of progress towards creating a mentally healthy workplace</p> <p>Level 2 –Ad hoc assessment of progress</p> <p>Level 3 – Ongoing assessment of progress using predetermined KPIs, relevant to vision and drivers</p> <p>Level 4 – As above, plus regular reporting to leaders and Board</p> <p>Level 5 – As above, plus accountability of improvements</p>		